
Index Authors

Volume 11 (2025)

- Achmad Gozali, 131
Adhimas Brahmantyo, 285
Aditya Sri Listyoko, 140
Aditya Sri Listyoko, 208
Aditya Sri Listyoko, 223
Agung Budi Sutiono, 191
Agus Andreas Santoso, 140
Agus Hidayat, 62
Ainur Rahmah, 123
Ali Assagaf, 114
Amalia Sutoyo, 159
Amira Permatasari Tarigan, 54
Ammar Abdurrahman Hasyim, 75
Ammar Abdurrahman Hasyim, 250
Ana Rima Setijadi, 22
Anak Agung Sagung Putri Pradnyandari, 269
Ananda Pippahli Vidya, 153
Andi Darwis, 174
Andreas Infianto, 22
Anna Febriani, 183
Anna Febriani, 69
Anna Maurina Singal, 232
Anna Rozaliyani, 250
Anna Surgean Veterini, 123
Archie Arman Dwiyatna, 123
Arda Pratama Putra Chafid, 107
Arinto Yudi Ponco Wardoyo, 223
Arnengsih Nazir, 191
Athok Shofiudin Maarif, 201
Avissena Dutha Pratama, 22
Aziziah Aziziah, 250
Bagus Radityo Amien, 131
Bagus Radityo Amien, 174
Bintang Yinke Magdalena Sinaga, 241
Brandon Clementius, 191
Christi Giovani Anggasta Hanafi, 6
Cleine Michaela, 208
Daniel Chriswinanto Adityo Nugroho, 216
Darren Wan-Teck Lim, 22
Darren Wan-Teck Lim, 47
Dea Putri Audina, 174
Deden Permana, 223
Dewi Roziqo, 256
Dicky Soehardiman, 174
Dina Afiani, 47
Dwi Anggita, 147
Edward Pandu Wiriansya, 147
Eko Setijanto, 201
Eko Suhartono, 114
Elisna Syahrudin, 22
Elisna Syahrudin, 47
Erna Kusumawardhani, 114
Esra Arslan Aksu, 1
Evelyn Nathania, 93
Evlina Suzanna, 47
Faisal Yunus, 131
Faisal Yunus, 285
Fannie Rizki Ananda, 22
Farah Almadina, 256
Farah Fatma Wati, 62
Farah Fatma Wati, 69
Farah Fatma Wati, 83
Farah Fatma Wati, 183
Fariz Nurwidya, 6
Fariz Nurwidya, 232
Fathiyah Isbaniah, 174
Franciscus Sanjaya, 263
Frans Raffael, 54
Frida Welhelmina Tako, 241
Gabriella Anggraini, 191
Garinda Alma Duta, 62
Grace Natalia Sari, 153
Hana Athaya Nurhalizah, 191
Hana Khairina Putri Faisal, 250

- Hanna Lianti Afladhia, 15
 Harun Al Rasyid, 140
 Haryati Haryati, 22
 Haryati Haryati, 83
 Haryati Haryati, 114
 Heidy Agustin, 6
 Helmia Hasan, 62
 Heni Rachmawati, 123
 Herdiani Sulisty Putri, 123
 I Gusti Putu Adietha Chandra Putra, 166
 I Made Subagiarta, 93
 I Wayan Ardyan Sudharta Putra, 166
 Ibrahim Syamsuri, 183
 Ida Ayu Jasminarti Dwi
 Kusumawardani, 22
 Ika Kustiyah Oktaviyanti, 114
 Indi Esha, 285
 Indi Esha, 298
 Ira Nurrasyidah, 114
 Irene Audrey Davalynn Pane, 250
 Irm Syafa'ah, 107
 Irm Syafa'ah, 114
 Irm Syafa'ah, 256
 Irm Syafa'ah, 263
 Izhar Fitrah Ahmad, 147
 Jamal Zaini, 250
 Jelita Siregar, 241
 Juliandi Harahap, 241
 Kana Wulung Arie Ichida Prinasetyo, 256
 Krisadelfa Sutanto, 232
 Laksmi Wulandari, 22
 Laksmi Wulandari, 69
 Laksmi Wulandari, 183
 Leli Saptawati, 201
 Linda Mahardhika, 232
 Lutfi Lafil Cahya Putra, 201
 Made Agustya Darma Putra Wesnawa, 93
 Maryani Maryani, 201
 Mohamad Isa, 114
 Muhammad Abbas Basalamah, 131
 Muhammad Alfin Hanif, 22
 Muhammad Bimo Adi Wicaksono, 131
 Muhammad Hendi Saputra, 83
 Muhammad Khairani, 298
 Muhammad Yusuf Adira Putra, 47
 Nadhifa Az Zahra, 269
 Nanik Setijowati, 31
 Nanik Setijowati, 208
 Naruaki Ogasawara, 276
 Natalie Duyen, 22
 Nesyana Nurmadilla, 147
 Ngakan Putu Parsama Putra, 208
 Ni Wayan Candrawati, 263
 Nita Puspita, 216
 Noni Novisari Soeroso, 22
 Noni Novisari Soeroso, 39
 Noni Novisari Soeroso, 47
 Novi Andriani Siagian, 39
 Novita Andayani, 22
 Oğuz Uzun, 1
 Oscar Gilang Purnajati, 216
 Putri Amadea Gunawan, 153
 Rahel Yuana Sadikim, 62
 Rahmaningsih Mara Sabirin, 75
 Rahmi Rifany Latif, 101
 Rania Imaniar, 232
 Ratnawati Ratnawati, 131
 Resyana Santoso, 166
 Retno Asih Setyoningrum, 107
 Reza Aditya Mahendra, 31
 Rezki Tantular, 223
 Rezky Pratiwi Lambang Basri, 147
 Rika Hapsari, 107
 Rina Anggriyani, 101
 Rini Savitri Daulay, 241

Rizky Fajar Meirawan, 123	Syamsul Bihar, 39
Roihan Mohamad Iqbal, 75	Taufik Ashar, 39
Sabrina Ermayanti, 22	Taufik Ashar, 47
Saidah Mafisah, 223	Teguh Rahayu Sartono, 31
Sastia Rakhma, 31	Theresia Feline Husen, 153
Satuman Satuman, 123	Tutik Kusmiati, 269
Shaogi Syam, 6	Ungky Agus Setyawan, 223
Shaogi Syam, 232	Vebiyanti Tentua, 101
Shelda Friuley Nanlohy, 101	Vina Zakiah Latuconsina, 101
Siswanto Siswanto, 75	Vincentius Adrian Madargerong, 114
Sita Andarini, 15	Wayan Wahyu Semara Putra, 166
Soni Sunarso Sulistiawan, 123	Wigit Kristianto, 107
Sri Melati Munir, 22	Wiji Lestari, 6
Stella Agatha Widjaja, 269	Yani Jane Sugiri, 140
Suprayitno Wardoyo, 153	Yani Sodikah, 147
Suryanti Dwi Pratiwi, 22	Yanita Novalina Ursula, 101
Suryanti Dwi Pratiwi, 31	Yiska Martelina, 216
Suryanti Dwi Pratiwi, 140	Yolanda Kadir, 75
Susanthy Djajalaksana, 208	Yoseph Leonardo Samodra, 241
Susanthy Djajalaksana, 223	Yudi Apriyanto, 69
Suyanto Suyanto, 298	

Index Subjects

Volume 11 (2025)

- Acinetobacter baumannii*, 201
Acute respiratory distress syndrome (ARDS), 159
Adenocarcinoma, 47
Adenocarcinoma, 114
Ambulatory water-sealed drainage (WSD), 263
Anaplastic lymphoma kinase, 47
Anatomic pathology differentiation, 114
Appetite, 232
Arrhythmia, 131
Asthma, 1
BPaL/M, 241
Bronchial artery embolization, 174
Bronchial hyperreactivity, 1
Bronchial provocation test, 1
Bronchitis, 216
Bronchoscopy, 174
Cancer therapies, 83
Cancer, 15
Cancer, 22
Cancer, 31
Cancer, 39
Cancer, 47
Cancer, 69
Cancer, 75
Cancer, 83
Cancer, 114
Cancer, 183
Cancer, 223
Cancer, 250
Carbon disulfide (CS₂), 298
Carbon, 298
Carcinoembryonic antigen (CEA), 140
Cardiovascular diseases, 131
Central nervous system, 269
Chemotherapy, 250
Chronic cough, 1
Chronic obstructive pulmonary disease (COPD), 54
Chronic obstructive pulmonary disease (COPD), 131
Chronic obstructive pulmonary disease (COPD), 276
Chronic respiratory diseases, 1
Chronic respiratory diseases, 54
Chronic respiratory diseases, 131
Chronic respiratory diseases, 174
Chronic respiratory diseases, 216
Combined pulmonary fibrosis and emphysema (CPFE), 54
Conservative, 263
Cor pulmonale, 159
Decreased pulmonary function, 298
Depression, 15
Descending necrotizing mediastinitis, 153
Diabetes mellitus (DM), 101
Diplopia, 269
Double-lumen, 39
Drug-induced liver injury, 256
Dyspnea, 75
Dyspnea, 191
E-cigarette or vaping use-associated lung injury (EVALI), 285
EGFR-TKI, 22
EGFR-TKI, 140
Elderly, 93
Electronic cigarettes, 285
Empyema, 166
Endothelial nitric oxide synthase (eNOS), 123
Essential oil, 123
Exercise tolerance, 191
Fungal colonization, 250
Global lung function initiative, 93
Health risk, 123
Hemoptysis, 174
Holistic approach, 62
Human & disease, 208
Human & health, 93
Human & health, 107
Human & health, 147

Human & health, 191
 Human immunodeficiency virus (HIV), 101
 IFN- γ , 31
 Immunocompetent, 269
 Infection, 153
 Infectious disease, 201
 Inspiratory muscle training, 75
 Intensive care unit (ICU), 201
 Interleukin-6, 107
 International cooperation, 276
 Klebsiella pneumoniae, 147
 Lactobacillus rhamnosus, 147
 Length of hospital stay, 216
 Linezolid, 241
 Lung adenocarcinoma, 22
 Lung aging, 93
 Lung cancer, 15
 Lung cancer, 31
 Lung cancer, 47
 Lung cancer, 183
 Lung cancer, 223
 Lung cancer, 250
 Lung cancers, 75
 Lung cavity, 6
 Lung function test, 93
 Lung injury, 83
 Lung injury, 285
 Lung tuberculosis, 166
 Lung, 69
 Malignant pleural effusion, 114
 Malignant pleural effusion, 208
 Malnutrition, 232
 Malnutrition, 6
 Management strategies, 83
 Mechanical ventilation, 159
 Mental health, 15
 Mesenchymal, 69
 Mice lung inflammation, 123
 Monitoring, 183
 Multidrug-resistant tuberculosis (MDR-TB), 241
 Network analysis, 276
 Neutrophil lymphocyte ratio (NLR), 101
 Nigella sativa, 31
 Nitric oxide (NO), 123
 Non-small cell lung cancer, 47
 NSCLC, 140
 Overall survival (OS), 140
 Pandemic, 15
 Persistent pneumothorax, 263
 Personal protective equipment (PPE), 298
 Pigtail, 39
 Pleural effusion, 39
 Pleural effusion, 191
 Pleural fluid glucose, 208
 Pneumonia, 107
 Predictive factors, 216
 Pregnancy, 256
 PRESS score, 107
 Primary pulmonary myxoid sarcoma (PPMS), 69
 Probiotics, 147
 Progression-free survival (PFS), 140
 Progression-free survival, 22
 Ptosis, 269
 Pulmonary disease, 232
 Pulmonary disease, 276
 Pulmonary rehabilitation, 191
 Pulmonary tuberculosis, 6
 Pulmonary tuberculosis, 101
 Quality of life, 31
 Research collaboration, 276
 Respiratory failure, 159
 Risk factors, 62
 Risk factors, 201
 Silicotuberculosis, 62

Smoking, 250
Squamous cell carcinoma, 114
Systemic therapy, 183
Therapy response, 183
Time to progression, 22
Tissue inhibitor of metalloproteinase-1 (TIMP-1), 208
Tobacco addiction, 285
Toddlers, 216
Tuberculosis aneurysm, 256
Tuberculosis pleurisy, 166
Tuberculosis, 6
Tuberculosis, 62
Tuberculosis, 101
Tuberculosis, 153
Tuberculosis, 159
Tuberculosis, 166
Tuberculosis, 232
Tuberculosis, 241
Tuberculosis, 256
Tuberculosis, 263
Tuberculosis, 269
Tumor, 69
Uncontrolled, 54
Urinary midkine, 223
Vapes, 285
Ventilator-associated pneumonia (VAP), 201
Viscose rayon fiber, 298
Vitamin D, 107
Volatile organic compounds (VOCs), 223
Zinc, 232

GUIDELINES FOR AUTHOR

Jurnal Respirasi (JR) publishes articles on all aspects of pulmonary- and respiratory-related disciplines. The manuscript is submitted directly to <https://e-journal.unair.ac.id/JR/index>. Manuscripts are considered for publication on the condition that they have not been previously published or submitted for publication by other journals. Articles can be classified as original articles, case reports, or literature reviews (including systematic reviews and meta-analyses) that inform readers about current issues, innovative cases, rare cases, and article reviews in the field of pulmonary and respiratory medicine. **JR** will automatically reject any manuscript submitted by e-mail or mail (letter). In addition, authors are requested to have [ORCID ID](#) upon submission to this journal.

The manuscript must be **less than 4000 words (exclude Abstract and References)**. The manuscript must be typed on a word processor and submitted in the form of a soft copy file. The obligatory **Times New Roman** font should be in size **14 pt for the title** and **12 pt for all other sections of text**. The title should be written in **bold, left-aligned**, the first letter in each word be **capitalized**, and **any Latin name is presented in italics**. The manuscript must be of **A4 format** typed with **one and a half** space between lines and a **2.5 cm (1 inch)-wide margin**. Authors are strongly advised to follow the manuscript preparation guidelines provided below.

1. FORMAT FOR ORIGINAL ARTICLE (RESEARCH REPORT)

- **Title:** brief, specific, informative, and written in English. It must contain **a maximum of 20 words** with the first letter in each word capitalized.
- **Name(s) of Author(s):** should include author(s)' full name(s) and ORCID ID logo hyperlinked to the author(s)' ORCID ID page.
- **Affiliation(s):** listed sequentially using a number ⁽¹⁾ and the name of the department(s) to which the author(s) are affiliated (including the city and the country).

Example:

Alfian Nur Rosyid¹, Han Chen Tsu², Sergey Tjulandin³, and Koichi Matsuda⁴

¹ Department of Pulmonology and Respiratory Medicine, Faculty of Medicine, Universitas Airlangga, Surabaya - Indonesia

² Department of Respiratory Medicine, Shanghai Chest Hospital, Jiao Tong University, Shanghai - China

³ Department of Clinical Pharmacology and Chemotherapy, N. N. Blokhin Russian Cancer Research Center, Moscow - Russia

⁴ Division of Pulmonary Medicine, Department of Medicine, Kobe University, Kobe - Japan

The manuscript for Original Article should not exceed 4000 words (exclude Abstract and References).

- **Abstract:** The manuscript should contain an abstract that is self-contained and citation-free, written in English around **200-250 words**. It consists of introduction, methods, results, and conclusion.
- **Keywords:** Consists of **3-5 words** in English, started with a capital letter (sentence case) without an ending point, and must contain at least one keyword of [Sustainable Development Goals \(SDGs\)](#). Keywords should apply terms present in [Medical Subject Headings \(MeSH\)](#).
- **Introduction:** State the rationale for the study, a brief description of the background that led to the study, identify the main problem, and explain the study purpose. Establish a gap in the current knowledge, state the novelties, and convince the readers that the gap has been addressed. It should contain **no more than four (4) paragraphs** without subheadings. Current results and conclusions should not be included.
- **Methods:** Explain in detail about the research design, settings, time frame, variables, population, samples, sampling methods, instruments, data analyses, and information on ethical clearance. This chapter may be divided into sections if several methods are used.
- **Results:** This section may be further divided into subsections with subheadings. Describe the significance of your findings and the most important part of your manuscript. Follow a logical stream of thought. The total number of tables and figures is advisably **no more than six (6)**.
- **Figures:** Cite figures in ascending Arabic numerals according to the first appearance in the manuscript file. The original format must be in JPEG and not be smaller than 300 dpi. Figures require a label with Arabic numerals in order (e.g., "Figure 1", "Figure 2", and so on) and a brief descriptive title to be placed below the figure, center-aligned. Do not submit your figures in separate files.
- **Tables:** Cite tables in ascending Arabic numerals according to the first appearance in the manuscript. Tables require a label with Arabic numerals in order (e.g., "Table 1", "Table 2", and so on) and a brief descriptive title to be placed above the table. Do not submit your tables in separate files.
- **Discussion:** The authors should explain the result of the study, not repeating the results, and how the results answered the research problem. Differences and similarities with previous studies should be elaborated. State the limitation of the study and the possibilities for developing further studies. Limitations of the study should also be mentioned in this section.
- **Conclusion:** This should clearly explain the main conclusion of the manuscript, highlighting its importance and relevance as well as suggestion or recommendation for further research.
- **Acknowledgments:** Those who contributed to the work but do not meet the authorship criteria should be listed in the Acknowledgments with a description of the contribution.
- **Conflict of Interest:** All manuscripts submitted to JR must be accompanied by a conflict of interest disclosure statement or a declaration by the authors that they do not have any conflicts of interest to declare.
- **Funding Statement:** The authors should state how the research was funded in this section, including grant numbers if applicable.
- **Authors' Contributions:** All authors have contributed to all processes in this research, including preparation, data gathering and analysis, drafting, and approval for publication of this manuscript.

- **References:** References should be prepared according to **Vancouver** style and numbered consecutively in the order in which they are cited in the text. References are identified in the text by Arabic numerals in superscript and are always cited after dots or commas. Preferably use references from scientific articles (with issues **not exceeding the last 5 years**) and textbooks **maximum published in the last 10 years**. The authors must use reference management software to write citations and references, such as [Mendeley®](#), [Zotero®](#), and [EndNote®](#).

Reference to journal articles:

- Muttarak M, Peh WCG. Case 91: Tuberculous Epididymo-orchitis. *Radiology*. 2018;238(2):748-751
- Christiani D, Wang X, Pan L, Zhang H, Sun B, Dai H. Longitudinal changes in pulmonary function and respiratory symptoms in cotton textile workers. A 15-yr follow-up study. *Am J Respir Crit Care Med*. 2011;163(4):847–853

Reference to book:

- Selman M, Carillo G, Navarro C, Gaxiola M. Hypersensitivity Pneumonitis. In: *Pulmonary Arterial Hypertension and Interstitial Lung Diseases*. LLC: Humana Press; 2017. p.1391

Reference to website:

- Force, W. Global Strategy for Asthma Management and Prevention [serial online] 2019 Jan-Mar [cited 2020 May 5]. Available from: URL: <http://www.ginasthma.org>.

Reference to proceeding:

- Yoshiro J, Mamoto H, Recent advances in clinical neurophysiology. *Proceedings of the 24th Congress of the APSR: 2019 Nov 14-17; Kyoto, Japan*. Amsterdam: Elsevier; 2020.

2. FORMAT FOR CASE REPORTS

- **Title:** brief, specific, informative, and written in English. It must contain a **maximum of 20 words** with the first letter in each word capitalized.
- **Name(s) of Author(s):** should include author(s)' full name(s) and ORCID ID logo hyperlinked to the author(s)' ORCID ID page.
- **Affiliation(s):** listed sequentially using a number (1) and the name of the department(s) to which the author(s) are affiliated (including the city and the country).

Example:

Alfian Nur Rosyid¹, Han Chen Tsu², Sergey Tjulandin³, and Koichi Matsuda⁴

¹ Department of Pulmonology and Respiratory Medicine, Faculty of Medicine, Universitas Airlangga, Surabaya - Indonesia

² Department of Respiratory Medicine, Shanghai Chest Hospital, Jiao Tong University, Shanghai - China

³ Department of Clinical Pharmacology and Chemotherapy, N. N. Blokhin Russian Cancer Research Center, Moscow - Russia

⁴ Division of Pulmonary Medicine, Department of Medicine, Kobe University, Kobe - Japan

The manuscript for Case Report should not exceed 3500 words (exclude Abstract and References).

- **Abstract:** The manuscript should contain an abstract that is self-contained and citation-free, written in English around **200-250 words**. It consists of introduction, case, and conclusion.
- **Keywords:** Consists of **3-5 words** in English, started with a capital letter (sentence case) without an ending point, and must contain at least one keyword of [Sustainable Development Goals \(SDGs\)](#). Keywords should apply terms present in [Medical Subject Headings \(MeSH\)](#).
- **Introduction:** State the rationale for the study, a brief description of the background that led to the study, identify the main problem, and explain the study purpose. Establish a gap in the current knowledge, state the novelties, and convince the readers that the gap has been addressed. It should contain **no more than four (4) paragraphs** without subheadings. Current results and conclusions should not be included.
- **Case:** This section contains the medical case about the patient's condition, time frame, disease progression, laboratory findings, different diagnose and treatments uprightly. Explain the assessment and the decision chosen to treat the patient.
- **Figures:** Cite figures in ascending Arabic numerals according to the first appearance in the manuscript file. The original format must be in JPEG and not be smaller than 300 dpi. Figures require a label with Arabic numerals in order (e.g., "Figure 1", "Figure 2", and so on) and a brief descriptive title to be placed below the figure, center-aligned. Do not submit your figures in separate files.
- **Tables:** Cite tables in ascending Arabic numerals according to the first appearance in the manuscript. Tables require a label with Arabic numerals in order (e.g., "Table 1", "Table 2", and so on) and a brief descriptive title to be placed above the table. Do not submit your tables in separate files.
- **Discussion:** The authors should explain the result of the study, not repeating the results, and how the results answered the research problem. Differences and similarities with previous studies should be elaborated. State the limitation of the study and the possibilities for developing further studies. Limitations of the study should also be mentioned in this section.
- **Conclusion:** This should clearly explain the main conclusion of the manuscript, highlighting its importance and relevance as well as suggestion or recommendation for further research.
- **Acknowledgments:** Those who contributed to the work but do not meet the authorship criteria should be listed in the Acknowledgments with a description of the contribution.
- **Conflict of Interest:** All manuscripts submitted to JR must be accompanied by a conflict of interest disclosure statement or a declaration by the authors that they do not have any conflicts of interest to declare.

- **Funding Statement:** The authors should state how the research was funded in this section, including grant numbers if applicable.
- **Authors' Contributions:** All authors have contributed to all processes in this research, including preparation, data gathering and analysis, drafting, and approval for publication of this manuscript.
- **References:** References should be prepared according to **Vancouver** style and numbered consecutively in the order in which they are cited in the text. References are identified in the text by Arabic numerals in superscript and are always cited after dots or commas. Preferably use references from scientific articles (with issues **not exceeding the last 5 years**) and textbooks **maximum published in the last 10 years**. The authors must use reference management software to write citations and references, such as [Mendeley®](#), [Zotero®](#), and [EndNote®](#).

Reference to journal articles:

- Muttarak M, Peh WCG. Case 91: Tuberculous Epididymo-orchitis. *Radiology*. 2018;238(2):748-751
- Christiani D, Wang X, Pan L, Zhang H, Sun B, Dai H. Longitudinal changes in pulmonary function and respiratory symptoms in cotton textile workers. A 15-yr follow-up study. *Am J Respir Crit Care Med*. 2011;163(4):847–853

Reference to book:

- Selman M, Carillo G, Navarro C, Gaxiola M. Hypersensitivity Pneumonitis. In: *Pulmonary Arterial Hypertension and Interstitial Lung Diseases*. LLC: Humana Press; 2017. p.1391

Reference to website:

- Force, W. Global Strategy for Asthma Management and Prevention [serial online] 2019 Jan-Mar [cited 2020 May 5]. Available from: URL: <http://www.ginasthma.org>.

Reference to proceeding:

- Yoshiro J, Mamoto H, Recent advances in clinical neurophysiology. *Proceedings of the 24th Congress of the APSR: 2019 Nov 14-17; Kyoto, Japan*. Amsterdam: Elsevier; 2020.

3. FORMAT FOR LITERATURE REVIEWS

- **Title:** brief, specific, informative, and written in English. It must contain **a maximum of 20 words** with the first letter in each word capitalized.
- **Name(s) of Author(s):** should include author(s)' full name(s) and ORCID ID logo hyperlinked to the author(s)' ORCID ID page.
- **Affiliation(s):** listed sequentially using a number (¹) and the name of the department(s) to which the author(s) are affiliated (including the city and the country).

Example:

Alfian Nur Rosyid¹, Han Chen Tsu², Sergey Tjulandin³, and Koichi Matsuda⁴

¹ Department of Pulmonology and Respiratory Medicine, Faculty of Medicine, Universitas Airlangga, Surabaya - Indonesia

² Department of Respiratory Medicine, Shanghai Chest Hospital, Jiao Tong University, Shanghai - China

³ Department of Clinical Pharmacology and Chemotherapy, N. N. Blokhin Russian Cancer Research Center, Moscow - Russia

⁴ Division of Pulmonary Medicine, Department of Medicine, Kobe University, Kobe - Japan

The manuscript for Literature Review should not exceed 4000 words (exclude Abstract and References).

- **Abstract:** The manuscript should contain an abstract that is self-contained and citation-free, written in English around **200-250 words**.
- **Keywords:** Consists of **3-5 words** in English, started with a capital letter (sentence case) without an ending point, and must contain at least one keyword of [Sustainable Development Goals \(SDGs\)](#). Keywords should apply terms present in [Medical Subject Headings \(MeSH\)](#).
- **Introduction:** State the rationale for the study, a brief description of the background that led to the study, identify the main problem, and explain the study purpose. Establish a gap in the current knowledge, state the novelties, and convince the readers that the gap has been addressed. It should contain **no more than four (4) paragraphs** without subheadings. Current results and conclusions should not be included.
- **Review:** This section can be further divided into sub-sections. Explain the topic with sufficient and scientific evidence. Follow a logical stream of thought. Thus, the interpretation can be drawn.
- **Figures:** Cite figures in ascending Arabic numerals according to the first appearance in the manuscript file. The original format must be in JPEG and not be smaller than 300 dpi. Figures require a label with Arabic numerals in order (e.g., “Figure 1”, “Figure 2”, and so on) and a brief descriptive title to be placed below the figure, center-aligned. Do not submit your figures in separate files.
- **Tables:** Cite tables in ascending Arabic numerals according to the first appearance in the manuscript. Tables require a label with Arabic numerals in order (e.g., “Table 1”, “Table 2”, and so on) and a brief descriptive title to be placed above the table. Do not submit your tables in separate files.
- **Summary:** This should clearly explain the main summary of the manuscript, highlighting its importance and relevance as well as suggestion or recommendation for further research.
- **Acknowledgments:** Those who contributed to the work but do not meet the authorship criteria should be listed in the Acknowledgments with a description of the contribution.
- **Conflict of Interest:** All manuscripts submitted to JR must be accompanied by a conflict of interest disclosure statement or a declaration by the authors that they do not have any conflicts of interest to declare.
- **Funding Statement:** The authors should state how the research was funded in this section, including grant numbers if applicable.
- **Authors’ Contributions:** All authors have contributed to all processes in this research, including preparation, data gathering and analysis, drafting, and approval for publication of this manuscript.

- **References:** References should be prepared according to **Vancouver** style and numbered consecutively in the order in which they are cited in the text. References are identified in the text by Arabic numerals in superscript and are always cited after dots or commas. Preferably use references from scientific articles (with issues **not exceeding the last 5 years**) and textbooks **maximum published in the last 10 years**. The authors must use reference management software to write citations and references, such as [Mendeley®](#), [Zotero®](#), and [EndNote®](#).

Reference to journal articles:

- Muttarak M, Peh WCG. Case 91: Tuberculous Epididymo-orchitis. Radiology. 2018;238(2):748-751
- Christiani D, Wang X, Pan L, Zhang H, Sun B, Dai H. Longitudinal changes in pulmonary function and respiratory symptoms in cotton textile workers. A 15-yr follow-up study. Am J Respir Crit Care Med. 2011;163(4):847–853

Reference to book:

- Selman M, Carillo G, Navarro C, Gaxiola M. Hypersensitivity Pneumonitis. In: Pulmonary Arterial Hypertension and Interstitial Lung Diseases. LLC: Humana Press; 2017. p.1391

Reference to website:

- Force, W. Global Strategy for Asthma Management and Prevention [serial online] 2019 Jan-Mar [cited 2020 May 5]. Available from: URL: <http://www.ginasthma.org>.

Reference to proceeding:

- Yoshiro J, Mamoto H, Recent advances in clinical neurophysiology. Proceedings of the 24th Congress of the APSR: 2019 Nov 14-17; Kyoto, Japan. Amsterdam: Elsevier; 2020.

ENGLISH EDITING SERVICE

Appropriate use of English is a requirement for review and publication in **JR**. For non-native speakers, professional English editing services may help improve the presentation of the manuscript prior to journal submission.

Examples of external professional services are:

1. [Enago](#)
2. [Proofed](#)
3. [Proofers](#)
4. [Eloquenti](#)
5. [Proofreading](#)
6. [London Proofreaders](#)
7. [Native Proofreading](#)
8. [Sastra Lingua](#)

Please note that using an external professional service for English editing **does not guarantee** publication in **JR**, but for non-native speakers, it is **recommended** to improve the quality of the manuscript presentation prior to peer-review. Even when external services are used, the sole and final responsibility regarding the manuscript content remains with the authors, and the use of any editing service must be disclosed in the Acknowledgment section, together with funding received for these services when applicable.

SUBMISSION PREPARATION CHECKLIST

As part of the submission process, authors are required to check off their submission's compliance with all of the following items, and submissions may be returned to authors that do not adhere to these guidelines.

1. The submission has not been previously published, nor is it before another journal for consideration (or an explanation has been provided in Comments to the Editor).
2. The submission file is in OpenOffice, Microsoft Word, RTF, or WordPerfect document file format.
3. Where available, URLs for the references have been provided.
4. The text uses 1.15 line spacing and 12-point font, employs italics rather than underlining (except with URL addresses), and all illustrations, figures, and tables are placed within the text at the appropriate points rather than at the end.
5. The text adheres to the stylistic and bibliographic requirements outlined in the [Guidelines for Authors](#), which is found in About the Journal.
6. If submitting to a peer-reviewed section of the journal, the instructions in [Ensuring a Blind Review](#) have been followed.

COPYRIGHT NOTICE

1. The journal allows the author to hold the copyright of the article without restrictions.
2. The journal allows the author(s) to retain publishing rights without restrictions
3. The legal formal aspect of journal publication accessibility refers to Creative Commons Attribution Share-Alike (CC BY-SA).
4. The Creative Commons Attribution Share-Alike (CC BY-SA) license allows re- distribution and re-use of a licensed work on the conditions that the creator is appropriately credited and that any derivative work is made available under “the same, similar or a compatible license”. Other than the conditions mentioned above, the editorial board is not responsible for copyright violation.

PRIVACY STATEMENT

The names and email addresses entered in this journal site will be used exclusively for the stated purposes of this journal and will not be made available for any other purpose or to any other party.

AUTHOR FEES

a. Article Submission Fee : IDR 0 / USD 0

No charge for manuscript submission.

b. Article Processing Charge: IDR 500,000 / USD 100

The author pays a publication fee amounted to IDR 500,000 (Indonesian author) and USD 100 (non-Indonesian author) for each manuscript published in the journal.

Bank BNI Universitas Airlangga

Account number : 9883030300000395

Name : Universitas Airlangga

Subject : APC Jurnal Respirasi

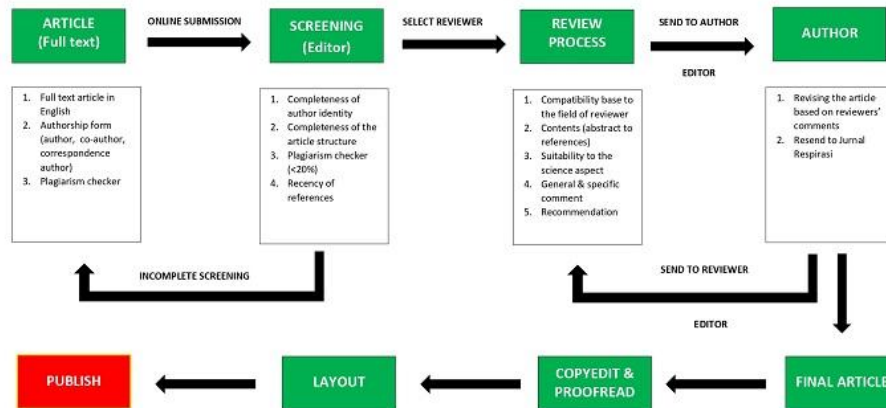
PEER REVIEW PROCESS

Jurnal Respirasi uses **double-blind review**, which means that both reviewer and author identities are concealed from the reviewers, and vice versa, throughout the review process. The article review process usually takes an average of **10 weeks**. This review period depends on the editors' and reviewers' duration in reviewing the manuscript. The reviewer's decision will be considered by the Board of Editors to determine the ensuing process of the manuscript.

In the case when two independent peer-reviewers have opposing decisions, the **third peer-reviewer** will be asked to review the manuscript and his/her decision will be final for determining whether the manuscript is accepted or rejected. The time allocated for the third peer-reviewer is **two (2) weeks**.

The practice of peer review is to ensure that only good manuscripts are published. It is an objective process at the heart of good scholarly publishing and is performed by all reputable scientific journals. All manuscripts in **Jurnal Respirasi** follow the procedures as shown below:

PUBLICATION PROCESS OF JURNAL RESPIRASI



JURNAL RESPIRASI 2021. Source: <https://e-journal.unair.ac.id/jr>

PUBLICATION FREQUENCY

Jurnal Respirasi is published **three times** in a year (**January, May, & September**) and contains **13 (thirteen) articles** in each number of volume.

OPEN ACCESS POLICY

This is an open access journal that all content is available for other users. Users are allowed to read, download, copy, search, print, or link to the full texts of the articles, without asking prior permission from the publisher or the author.

This journal provides immediate open access to its content on the principle that makes researches available freely to the public and supports a greater global exchange of knowledge.

ARCHIVING

This journal utilizes the LOCKSS system to create a distributed archiving system among participating libraries and permits those libraries to create permanent archives of the journal for purposes of preservation and restoration. [More...](#)

PLAGIARISM STATEMENT

The editors of **Jurnal Respirasi** will screen all submitted manuscripts for plagiarism using **Turnitin** plagiarism checker. This journal does not accept any plagiarism in any manuscripts or it will be rejected immediately. The manuscript is passed if the similarity is less than 20%.

SUBMISSIONS

ONLINE SUBMISSIONS

Already have a Username/Password for Jurnal Respirasi?

[GO TO LOGIN](#)

Need a Username/Password?

[GO TO REGISTRATION](#)

Registration and login are required to submit items online and to check the status of current submissions.

JOURNAL CONTACT

MAILING ADDRESS

Department of Pulmonology & Respiratory Medicine

Faculty of Medicine Universitas Airlangga

Jl. Mayjen Prof Dr. Moestopo 6-8 Surabaya 60286 Indonesia

PRINCIPAL CONTACT

Winariani Koesoemoprodjo, dr., Sp.P(K), MARS, FCCP

Department of Pulmonology & Respiratory Medicine

Faculty of Medicine Universitas Airlangga 082132152121

Jl. Mayjen Prof Dr. Moestopo 6-8 Surabaya 60286 Indonesia

Phone: +62817375335

Email: respirasi@journal.unair.ac.id

SUPPORT CONTACT

Alifia Fiarnanda Putri, S.KM.

Phone: +6281330245801

Email: respirasi@journal.unair.ac.id

ISSN 2407-0831



9 772407 083009